# State of South Dakota



# Candidate's or Committee's Report of Receipts and Expenditures

Candidates and candidate committees: File in the office where you filed your nominating petition.  PACs, political party, ballot question and other committees: File with Elections Department, Secretary of State's Office, OV 0 2 2006  500 E Capitol Ave., Pierre, SD 57501-5070  S.D. SEC. OF STATE
See pages 9 & 10 of the Guideline Book for specific instructions on completing this report.
Name of Candidate or Committee SD Medical Group Management Association PAC
Complete Mailing Address 1323 S. Minnesota Ave.: Sioux Falls, SD 57105-0624
Name of Person Making Report <u>Teresa Schumacher</u> Daytime Phone Number (605) 336-1965
If you are a candidate, what office are you seeking? N/A
If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed.
N/A
Type of Report (See pages 4 & 5 of Guideline Book) Pre-General Report
For Reporting Period Ending (See pages 4 & 5 of Guideline Book) 10/28/06
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The following verification must be completed before submitting report.
VERIFICATION OF PERSON MAKING REPORT
I <u>Tony Tiefenthaler</u> (print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.
Date: 10/31/0}  Candidate Signature or Signature of Committee Treasurer or Chairperson

Revised July 2001

Name of Candidate or	Committee_	SD	Medical	Group	Management	Association	PAC

For	the	reporting	period	ending	10/28/06
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## Schedule A - Direct Contributions

This schedule is used for reporting all direct contributions. You must keep a record of all contributors, but for this report you may combine all contributions of \$100 or less from individuals and the same from political parties and enter these sums as unitemized contributions on their respective lines below and on the next page. Any contribution of more than \$100 or aggregate during a calendar year from an individual or political party and all contributions from PAC's must be entered as a separate item (itemized) giving the amount, name, address and place of employment (if applicable) of the contributor. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space, or you may attach additional sheets of paper.

ized Contributions from	ı Individuals	Place of Employment	
Name	Residence Address	(Name of Employer)	
	第4		\$
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Name of Candidate or Committee SD Medical Gr	oup Management Ass	ociation PAC
For the reporting period ending 10/28/06	3	
Schedule A – Direct Con	tributions (continued)	)
Unitemized Contributions from Political Parties:		*\$ _0.00
Itemized Contributions from Political Parties		
Party Name	Address	
		\$
		\$
<b>Total of Itemized Contributions from Political Parties:</b>		*\$ <u>0.00</u>
	(1)	
Itemized Contributions from Political Action Committees (PAC's	s) - All contributions from PAC	C's must be itemized.
PAC Name	Address	
· · · · · · · · · · · · · · · · · · ·		\$
		\$
	111	\$
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		\$
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		\$
		\$
		\$
		\$
		\$
		\$
Table 10 and 10		\$
Total of Itemized Contributions from Political Action Committee	s:	*\$ <u>0.00</u>
Total of All Direct Contributions (Sum of all lines with an *)		\$ 125.00

the

Name of Candidate or Committee: SD	Medical Group Management As	sociation PAC
For the reporting period ending: 10/2		
Schedule B List on this schedule fund-raising events held to rais contributor gives more than \$100 or their contribution contributions must be itemized on Schedule A.	- Fund-Raising Events Proceeds se money for the candidate and the net proceeds on results in their aggregate being more than \$10	derived from each event. I
Type or Name of Event		Net Proceeds
Fotal:		0.00
Nature of Non-Cash Contribution	Name, Residence Address & Place of Employment	Estimated Value
Author of Non Cash Control		
	-	
otal:		0.00
Schoolse this schedule to report any refunds, interest earner	edule D - Other Income ed or other income which is not a direct contribu	
ource of Income		Amount
otal:		0.00

Total:

			Appendix					
Name of Candidat	te or Committee:	SD Medical Group Management A	ssociation PAC					
	period ending: 10							
		Schedule E – Expenditures	**					
This schedule is to repeate expenses. All other ex	ort all expenditures relations penses should be listed.	ting to a candidate's campaign. Line items have bee All contributions to candidates and committees	n provided for reporting common must be listed individually.					
Expenses Contributions Made to Candidates and Committees								
Item	Amount	Name of Candidate or Committee	Amount					
Advertising Consulting Postage Printing								
Rent								
Salaries								
Telephone								
Travel								
Utilities								
List other expense items below	List other expense amounts below							
			2					
	***							
Market Company								

Total Expenditures:

0.00

Name of Candidate or Committee:	SD	Medical	Group	Management	Association	PAC
For the reporting period ending:	10/2	28/06			2	

Schedule F - Debts and Obligations

This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.

Owed to:	Purpose:	Amount
		e e
tal Obligations:		0.00

Name of Candidate or Committee: SD Medical Group Management Association PAC

For the reporting period ending: 10/28/06

## **Summary Page**

This summary sheet will give a brief outline of all campaign finance activity during this reporting period. Please transfer all totals from the schedules previously completed.

1.	Amount or	n hand, i	f any, a	at the	beginning	of the	reporting	period:
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\$ 1,217.50

### 2. Receipts

Schedule A	- Direct	Contributions

\$ 125.00

Schedule B - Fund-Raising Events

\$<u>0.00</u>

Schedule C - In Kind Contributions

\$ 0.00

Schedule D - Other Income

\$ 0.00

Total of all Receipts

\$ 125.00

3. Total Monetary Receipts (A+B+D)

\$ 125.00

4. Candidate's Personal Contribution to Own Campaign

\$ 0.00

5. Monetary Loans to Candidate or Committee During Reporting Period

\$ 0.00

6. Monetary Loans Repaid During Reporting Period

\$<u>0.00</u>

7. Expenditures - Schedule E

\$ 0.00

8. Unpaid Obligations - Schedule F

\$<u>0.00</u>

9. Amount on hand at the close of this reporting period. \*
This should equal lines (1+3+4+5) – (6+7)

\$ 1,342.50

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